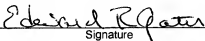
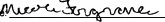


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) U0157.70003US01	
Application Number 10/500,602-Conf. #4753		Filed February 22, 2005	
For ADJUVANT FORMULATIONS FOR BACTERIAL AND VIRUS VACCINES AND METHOD OF MAKING SAME			
Art Unit 1644		Examiner Amy Juedes	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$150	\$75	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$570	\$285	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,290	\$645	\$ 645.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$2,010	\$1,005	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,730	\$1,365	\$ _____
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23/2825</u> . <input checked="" type="checkbox"/> Payment made via EFS-Web.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the			
<input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. 37 CFR 3.73(b) statement is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>31,616</u> .			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number _____.			
 _____ Signature		October 22, 2012 _____ Date	
Edward R. Gates _____ Typed or printed name		617.646.8000 _____ Telephone Number	
NOTE: This form must be signed in accordance with 37 CFR 1.33. See 37 CFR 1.4 for signature requirements and certifications. Submit multiple forms if more than one signature is required, see below*.			

<input type="checkbox"/>	*Total of <u>1</u> forms are submitted.
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Certificate of Electronic Filing Under 37 CFR 1.8	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with 37 CFR § 1.6(a)(4).	
Dated: October 22, 2012	Signature:  (F) Cole Forgrave